

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEE DETERMINATION | AS | | 11/18/94 |
| O.I.P.E. CLASSIFIER | | 43 | 11/22/98 |
| FORMALITY REVIEW | 59523 | | 12-13-99 |

59523

4-21-00

INDEX OF CLAIMS

Rejected: N
 Allowed: I
 (Through numerical) Canceled: A
 Restricted: O

Non-elected
 Interference
 Appeal
 Objected

| Claim | Date |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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